

NAME CHANGE

for a

FAMILY

1

To Request a Name Change
Completing and Filing
the Court Papers



Self-Service Center
NAME CHANGE FOR A FAMILY
CHECKLIST

You may use this packet if . . .

- ✓ You are a resident of the county in which you are filing this request.
- ✓ You want to ask the Court to change the name of your family (yourself and/or your spouse and and/or minor children), **AND**
- ✓ You are either the husband/father or wife/mother of that family.
- ✓ You are prepared, under penalty of perjury, to inform the Court whether any adult included on this application *has ever been convicted of a felony*, and *whether there are any pending charges for a felony or other offense* involving false statements or misrepresentation of identity, **AND**
- ✓ You understand a change of name will neither harm the rights of anyone included on this application nor release anyone included on this application from any obligations or liabilities incurred under a current or previous name.
- ✓ You are not changing your name or that of any other person included on this application to that of another person for the purpose of committing any crime or furthering any offense involving fraud or misrepresentation of identity.

DO NOT USE THESE FORMS TO:

- ✗ **ADD A FATHER'S NAME TO BIRTH CERTIFICATES OR TO ESTABLISH PATERNITY, OR**
- ✗ **CHANGE YOUR NAME BECAUSE YOU GOT MARRIED**

NOTE: You do not need to request a name change through the Court if you get married and want to use your spouse's last name. For information about name changes that can be obtained without going to court, such as to correct a birth certificate within five years of birth, visit the web site of the Arizona Office of Vital Records, at: <http://www.hs.state.az.us/vitalrcd>

The Arizona Office of Vital Records located at 1818 W. Adams, Phoenix, AZ 85007 is open between 8:00 a.m. and 4 p.m., Monday through Friday. **Free covered parking** is available one block east on 18th Avenue, between Van Buren and Adams Streets. You may also telephone Vital Records at 602-364-1300, but you may experience lengthy hold times.

READ ME: Consulting a lawyer before filing documents with the court may help prevent unexpected results. A list of lawyers you may hire to advise you on handling your own case or to perform specific tasks, as well as a list of court-approved mediators can be found on the Self-Service Center website at www.superiorcourt.maricopa.gov/SSC

Self-Service Center

REQUEST A CHANGE OF NAME FOR A FAMILY

This packet contains court forms and instructions to file an application to change the name of a family. The documents should appear in order as listed. Items in **BOLD** are forms that you will need to file with the Court. Non-bold items are instructions or procedures. Do **not** copy or file those pages!

Order	File Number	Title	# pages.
1	CVNCF1k	Checklist: <i>You may use these forms if . . .</i>	1
2	CVNCF1t	Table of Contents (this page)	1
3	CVNCF10p	Procedures: How to File a for a Name Change	3
4	CV10f	“Civil Cover Sheet”	2
5	CVNCF11f	“Application for Change of Name for a Family”	3
6	CVNC18f	“Notice of Hearing Regarding Application for Change of Name”	1
7	CVNC15f	“Consent of Parent to Name Change of Other Parent and Waiver of Notice”	1
8	CVNC16f	“Consent of Spouse to Name Change of an Adult and Waiver of Notice” (Use Only if Currently Legally Married)	1
9	CVNC17f	“Consent of Parent to Name Change of a Minor Child and Waiver of Notice” (Need 1 of these for each child)	1
10	CVNC17f	“Consent of Parent to Name Change of a Minor Child and Waiver of Notice” (Need 1 of these for each child)	1
11	CVNC13f	“Consent of Minor to Name Change” (Need 1 for each minor 14 or older. Make copies as needed <u>before</u> writing on form.)	1
12	CVNC24f	“Affidavit of Service by Certified Mail”	1
13	CVNCF81f	“Order Changing Name for a Family”	2
14	CVNCF81f	“Order Changing Name for a Family” (bring both to court)	2

The documents you have received are copyrighted by the Superior Court of Arizona in Maricopa County. You have permission to use them for any lawful purpose. These forms shall not be used to engage in the unauthorized practice of law. The Court assumes no responsibility and accepts no liability for actions taken by users of these documents, including reliance on their contents. The documents are under continual revision and are current only for the day they were received. It is strongly recommended that you verify on a regular basis that you have the most current documents.

SELF-SERVICE CENTER

PROCEDURES: HOW TO FILE FOR A CHANGE OF NAME WITH THIS COURT

STEP 1: Fill out the *“Application for Change of Name for a Family”* and make **2** copies.

STEP 2: Fill out the *“Civil Cover Sheet”* and check box **152** for “Change of Name” on page 2.

STEP 3: **FILE THE PAPERS AT THE COURT:**

WHO: **Who must file the “Application for Change of Name for a Family?”**

An adult parent or guardian who seeks the change, or his or her attorney.

GO TO: **GO TO THE CLERK OF COURT TO FILE YOUR PAPERS:** The Court is open from 8am-5pm, Monday-Friday. **You should go to the Court at least two hours before it closes.** You may file your court papers at the following Superior Court locations:

The Clerk of the Superior Court
Central Court Building
201 West Jefferson, 1st floor
Phoenix, Arizona 85003

The Clerk of the Superior Court
Southeast Court Facility
222 East Javelina Drive, 1st floor
Mesa, Arizona 85210-6201

The Clerk of the Superior Court
Northwest Court Facility
14264 West Tierra Buena Lane
Surprise, Arizona 85374

The Clerk of the Superior Court
Northeast Regional Court Center
18380 North 40th Street
Phoenix, AZ 85032

FEES: There are fees for filing petitions, responses, requests, motions, objections, and various forms with the Court. Cash, VISA/MasterCard debit or credit cards, money order, or personal in-state check made payable to the “Clerk of Superior Court” are acceptable forms of payment.

Go online to <http://clerkofcourt.maricopa.gov/fees.asp> or the Self-Service Center for a list of current fees.

If you cannot afford the filing fee and/or the fee for having the papers served by the Sheriff or by publication, you may request a **deferral** (payment plan) when you file your papers with the Clerk of the Court. **Deferral Applications** are available at **no charge** from the Self-Service Center.

PAPERS: Give **1** Civil Cover Sheet and **1** original plus **2** copies of the application to the Clerk along with the filing fee. Cash, VISA/MasterCard debit or credit cards, money order, or personal in-state check **made payable to the “Clerk of Superior Court”** are acceptable.*
Make sure the filing clerk stamps both of your copies and returns them to you.

STEP 4: **SCHEDULE YOUR HEARING WITH COURT ADMINISTRATION:**

At least **four** business days after you filed your Application for Change of Name, contact Court Administration to obtain the Commissioner’s Name and the date, time and place of your hearing by calling the telephone number listed below *between the hours of 9am-12 noon or 1-4pm, Monday through Friday*:

If you filed the Application for Name Change at:

201 W Jefferson, Phoenix **call 602-506-3397**
18380 N 40th Street, Phoenix: **call 602-506-3397**
222 E Javelina Drive, Mesa, **call 602-506-2023**
14264 W Tierra Buena Lane, Surprise, **call 602-372-9402**

You **must** then complete the *“Notice of Hearing Regarding Application for Change of Name”* form with the information received from Court Administration. The completed *“Notice of Hearing Regarding Application for Change of Name”* form must be filed with the Clerk of the Court at one of the Clerk locations listed in Step 3.

STEP 5: NOTIFY ANY INTERESTED PARTY

- If your spouse is not included in the requested name change, he/she must be notified about your request for name change and the scheduled hearing.
- If a parent of one or more of the minor children is not included in the requested name change, he/she must be notified about your request for name change and the scheduled hearing.
- Every minor child included in the requested name change that is 14 years or older, must sign a **"Consent of Minor to Name Change"** and have it notarized, or attend the hearing. One copy is included in this packet. If there is more than one minor 14 years or older, MAKE A COPY for each before filling out the form.

HOW TO NOTIFY: If you know where the person(s) lives, you can do one of the following:

1. **IF THE PERSON AGREES WITH YOUR REQUEST** - Give him/her a stamped copy of your application and the **"Notice of Hearing Regarding Application for Change of Name"** that shows the date, time, and place of your hearing. Then, have the person complete either the **"Consent of Parent to Name Change of a Minor Child and Waiver of Notice"** or **"Consent of Spouse to Name Change of an Adult and Waiver of Notice"** and have it notarized. That document serves as your proof of notice. Bring the applicable signed and notarized consent form to the hearing. (If the request for name change is for a minor, and the minor's parent is not included in that request, have the other parent complete the form entitled, **"Consent of Parent to Name Change of a Minor Child and Waiver of Notice."** That document serves as your proof of notice. Bring the signed and notarized **"Consent of Parent to Name Change of a Minor Child and Waiver of Notice"** to the hearing.)
2. **IF THE PERSON DOES NOT AGREE WITH YOUR REQUEST OR YOU ARE NOT SURE IF HE/SHE AGREES** - Give the person(s) a stamped copy of your application and the **"Notice of Hearing Regarding Application for Change of Name"** that shows the date, time, and place of your hearing. Then, have the person sign an **"Acceptance of Service"** (That form is available through the Self-Service Center), and have it notarized. That notarized form serves as the proof of notice. Bring the signed and notarized **"Acceptance of Service"** to the hearing.
OR
3. Send a clerk-stamped copy of your application and the **"Notice of Hearing Regarding Application for Change of Name"** showing the date, time, and place of hearing by certified mail/restricted delivery (return receipt requested). This must be done at least 30 days before the hearing. Proof of notice for this step is the card returned to you from the Post Office showing delivery. Bring the card and a completed **"Affidavit of Service by Certified Mail"** to the hearing. The person who should receive notice of the hearing must sign the return receipt.
4. **IF YOU DO NOT KNOW WHERE YOUR SPOUSE and/or THE OTHER PARENT LIVES: NOTICE BY PUBLICATION**
IF LAST KNOWN ADDRESS IN MARICOPA COUNTY OR ANOTHER STATE OTHER THAN ARIZONA: A Notice of Hearing (a legal notice classified advertisement) that shows the date, time, and place of your hearing must be published in a newspaper of general circulation in Maricopa County at least once a week for four (4) consecutive weeks before the hearing.
IF LAST KNOWN ADDRESS IN AN ARIZONA COUNTY OTHER THAN MARICOPA COUNTY: A Notice of Hearing (a legal notice classified advertisement) that shows the date, time, and place of your hearing must be published in a newspaper of general circulation in Maricopa County and the Arizona county of last known address at least once a week for four (4) consecutive weeks before the hearing.

AFTER publication has been completed, you must obtain and file an **"Affidavit of Publication"** from the newspaper indicating publication was completed.

STEP 6: ATTEND THE HEARING

WHO: All adults who are requesting a name change **MUST** be present at the hearing. If the request includes a minor child who is 14 years or older, that child must either be present at the hearing or you may provide a notarized **"Consent of Minor to Name Change"** from the child consenting to the name change.

BRING:

These documents are required for your hearing:

- 2 copies of ***“Order Changing Name For: A Minor Child, An Adult, or An Entire Family”*** (To receive a certified copy of your Order, bring VISA/MasterCard, cash, money order, or personal in-state check to the hearing. If you wish to pay this amount by personal in-state check, please make the check payable to “Clerk of Superior Court.”)
- Photo identification
- A Clerk stamped copy of all filed documents
- Proof of Notice as described above in Step 5.
- Divorce Decree (If applicable)
- Prior Name Change orders (If applicable)
- Proof of naturalization or resident alien status (If applicable)
- Copy of Orders of Protection and/or Injunctions Against Harassment still in effect
- Order terminating parental rights of the other parent (If applicable)
- Adoption decree (If applicable)
- Death certificate of minor child’s parent (If applicable)
- If the persons requesting the change of name, or the child, are not United States citizens, a passport or proof of immigration status must also be provided at time of hearing, **AND**
- **A copy** (preferably a “Certified” copy) **of the child(ren)’s official, government issued birth certificate. A HOSPITAL BIRTH CERTIFICATE will not meet Court requirements.**

All adults seeking a name change should bring with them their passport, driver's license, or other government-issued photo identification.

- ♦ **Adults seeking to change their birth records MUST also bring a copy of their government-issued birth certificate.**
- ♦ **The Court will not change a birth certificate without first seeing a copy. Hospital-issued birth certificates are largely ceremonial and generally will not satisfy Court requirements.**
- ♦ **The Court is looking for government-issued birth certificates.**

For adults ***not*** seeking to change their birth records, it is still ***strongly*** recommended that they bring their government-issued birth certificate to avoid possible delay.

NOTE: If the Court has ordered that the name on your Arizona birth records be changed, you will need to provide the “Office of Vital Records” with a **Certified Copy** of the Order. You may purchase a new birth certificate at the Office of Vital Records for a fee. *

****To get a certified copy of your court order*** you will need to present your Judge-signed copy along with payment in cash, personal in-state check or money order (payable to “Clerk of Superior Court”), or VISA/MasterCard (for each certified copy) to the Filing Counter within 48 hours. If you need additional copies after that time, you will need to go to the Court’s Customer Service Center at 601 W. Jackson Street in Phoenix.

Vital Records offices at 1818 W. Adams, Phoenix, AZ 85007, are open between 8:00 a.m. and 4 p.m., Monday through Friday. **Free covered parking** is available one block east on 18th Avenue, between Van Buren and Adams Streets. You may also telephone Vital Records at 602-364-1300. You may experience lengthy hold times.

Always make a copy of any documents you submit to the Court, and keep a copy for your records.

Superior Court of Arizona
In Maricopa County

Case Number _____

CIVIL COVER SHEET- NEW FILING ONLY
(Please Type or Print)

Plaintiff's Attorney:

Attorney's Bar Number: _____

Plaintiff's Name(s): (List all)

(List additional plaintiffs on page two and/or attach a separate sheet).

Defendant's Name(s): (List all.)

(List additional defendants on page two and/or attach a separate sheet).

EMERGENCY ORDER SOUGHT:
(if applicable)

- ☐ Temporary Restraining Order
☐ OSC – Order to Show Cause
☐ Employer Sanction

- ☐ Provisional Remedy
☐ Election Challenge
☐ Other _____

☐ RULE 8(i) COMPLEX LITIGATION DOES NOT APPLY. (Mark appropriate box under **Nature of Action**).

☐ RULE 8(i) COMPLEX LITIGATION APPLIES Rule 8(i) of the Rules of Civil Procedure defines a "Complex Case" as civil actions that require continuous judicial management. A typical case involves a large number of witnesses, a substantial amount of documentary evidence, and a large number of separately represented parties. (Mark appropriate box on page two as to complexity, **in addition** to the Nature of Action case category).

NATURE OF ACTION

(Place an "X" next to the **one** case category that most accurately describes your primary case.)

100 TORT MOTOR VEHICLE:

- ☐ 101 Non-Death/Personal Injury
☐ 102 Property Damage
☐ 103 Wrongful Death

110 TORT NON-MOTOR VEHICLE:

- ☐ 111 Negligence
☐ 112 Product Liability – Asbestos
☐ 112 Product Liability – Tobacco
☐ 112 Product Liability – Toxic/Other
☐ 113 Intentional Tort
☐ 114 Property Damage
☐ 115 Legal Malpractice
☐ 115 Malpractice – Other professional
☐ 117 Premises Liability
☐ 118 Slander/Libel/Defamation
☐ 116 Other (Specify) _____

120 MEDICAL MALPRACTICE:

- ☐ 121 Physician M.D. ☐ 123 Hospital
☐ 122 Physician D.O. ☐ 124 Other

130 CONTRACTS:

- ☐ 131 Account (Open or Stated)
☐ 132 Promissory Note
☐ 133 Foreclosure
☐ 138 Buyer-Plaintiff
☐ 139 Fraud
☐ 134 Other Contract (i.e. Breach of Contract)
☐ 135 Excess Proceeds - Sale
☐ Construction Defects (Residential/Commercial)
☐ 136 Six to Nineteen Structures
☐ 137 Twenty or More Structures

Is Interpreter Needed? ☐ Yes ☐ No

If yes, what language: _____

To the best of my knowledge, all information is true and correct.

Attorney/Pro Per Signature (If no attorney, YOUR signature)

Plaintiff's Address:

150-199 OTHER CIVIL CASE TYPES:

- ☐ 156 Eminent Domain/Condemnation
- ☐ 151 Eviction Actions (Forcible and Special Detainers)
- ☐ 152 Change of Name
- ☐ 153 Transcript of Judgment
- ☐ 154 Foreign Judgment
- ☐ 158 Quiet Title
- ☐ 160 Forfeiture
- ☐ 175 Election Challenge
- ☐ 179 Employer Sanction Action (A.R.S. §23-212)
- ☐ 180 Injunction against Workplace Harassment
- ☐ 181 Injunction against Harassment
- ☐ 182 Civil Penalty
- ☐ 186 Water Rights (**Not General Stream Adjudication**)
- ☐ 187 Real Property
- ☐ Sexually Violent Persons (A.R.S. §36-3704)
(Except Maricopa County)
- ☐ Minor Abortion (See Juvenile in Maricopa County)
- ☐ Special Action Against Lower Courts
(See lower court appeal cover sheet in Maricopa)
- ☐ 194-Immigration Enforcement Challenge
(§§1-501, 1-502, 11-1051)

150-199 UNCLASSIFIED CIVIL CASE TYPES:

- ☐ Notice of Appeal pursuant to A.R.S. § 12-904
(formerly "Administrative Review")
(Use lower court appeal cover sheet in Maricopa)
- ☐ 150 Tax Appeal
(All other tax matters must be filed in the AZ Tax Court)

Case No. _____

- ☐ 155 Declaratory Judgment
- ☐ 157 Habeas Corpus
- ☐ 184 Landlord Tenant Dispute - Other
- ☐ 159 Restoration of Civil Rights (Federal)
- ☐ 159 Clearance of Records (A.R.S. §13-4051)
- ☐ 190 Declaration of Factual Innocence(A.R.S. §12-771)
- ☐ 191 Declaration of Factual Improper Party Status
- ☐ 193 Vulnerable Adult (A.R.S. §46-451)
- ☐ 165 Tribal Judgment
- ☐ 167 Structured Settlement (A.R.S. §12-2901)
- ☐ 169 Attorney Conservatorships (State Bar)
- ☐ 170 Unauthorized Practice of Law (State Bar)
- ☐ 171 Out-of-State Deposition for Foreign Jurisdiction
- ☐ 172 Secure Attendance of Prisoner
- ☐ 173 Assurance of Discontinuance
- ☐ 174 In-State Deposition for Foreign Jurisdiction
- ☐ 176 Eminent Domain—Light Rail Only
- ☐ 177 Interpleader— Automobile Only
- ☐ 178 Delayed Birth Certificate (A.R.S. §36-333.03)
- ☐ 183 Employment Dispute - Discrimination
- ☐ 185 Employment Dispute - Other
- ☐ 195(a) Amendment of Marriage License
- ☐ 195(b) Amendment of Birth Certificate
- ☐ 163 Other

(Specify)

COMPLEXITY OF THE CASE

If you marked the box on page one indicating that Complex Litigation applies, place an "X" in the box of no less than one of the following:

- ☐ Antitrust/Trade Regulation
- ☐ Construction Defect with many parties or structures
- ☐ Mass Tort
- ☐ Securities Litigation with many parties
- ☐ Environmental Toxic Tort with many parties
- ☐ Class Action Claims
- ☐ Insurance Coverage Claims arising from the above-listed case types
- ☐ A Complex Case as defined by Rule 8(i) ARCP

Additional Plaintiff(s)

Additional Defendant(s)

Name of Person Filing:

Street Address:

City, State, Zip Code:

Telephone Number:

Represented by **Self (No Attorney)** **by Attorney**

If Attorney, State Bar Number:

For Clerk's Use Only

SUPERIOR COURT OF ARIZONA IN MARICOPA COUNTY

Case Number:

In the Matter of

APPLICATION FOR CHANGE OF NAME FOR A FAMILY (ARS 12-601)

Applicant

STATEMENTS TO THE COURT, UNDER OATH OR AFFIRMATION

1. INFORMATION ABOUT PERSONS FOR WHOM NAME CHANGE IS REQUESTED

A. Name on Birth Certificate (Applicant) or Current Legal Name

(First)

(Middle)

(Last)

(Applicant's Address is Listed above)

County of Residence:

Date of Birth:

(MM / DD / YY)

Place of Birth:

(City, State, Nation)

REQUESTS NAME BE CHANGED TO:

(First)

(Middle)

(Last)

B. Name on Birth Certificate or

Current Legal Name:

(First)

(Middle)

(Last)

Address Same as Applicant OR

Relation to Applicant:

County of Residence:

Date of Birth:

(MM/DD/YY)

Place of Birth:

(City, State, Nation)

REQUESTS NAME BE CHANGED TO:

(First)

(Middle)

(Last)

Case No.

C. Name on Birth Certificate or

Current Legal Name:

(First)

(Middle)

(Last)

Address Same as Applicant, OR:

Relation to Applicant:

County of Residence:

Date of Birth:

(MM/DD/YY)

Place of Birth:

(City, State, Nation)

REQUESTS NAME BE CHANGED TO:

(First)

(Middle)

(Last)

If you wish to include more people in this application, please attach another sheet of paper. List for each person their current name as on birth certificate, address, date of birth, county of residence, place of birth, relationship to Applicant, and the new name requested.

2. REASON FOR THIS REQUEST FOR CHANGE OF LEGAL NAME

I request that the legal names be changed as listed above for the following reasons:

3. STATEMENTS TO THE COURT REQUIRED BY ARIZONA LAW (A.R.S. § 12-601(C))

(Check the boxes that indicate a true statement.)

- a. I submit this application solely for the benefit and in the best interests of the persons for whom the name change is requested.
- b. I understand and acknowledge that this change of name, if granted, will not release me or anyone for whom a change of name is requested on this Application from any obligations incurred or harm any rights of property or action in any previous name.
- c. I am not knowingly requesting this change of name to that of another individual for the purpose of committing or furthering any offense of theft, forgery, fraud, perjury, organized crime or terrorism or any other offense involving false statements.
- d. Have you or any adult listed above ever been convicted of a felony? Yes No
If "yes", list all felony convictions on next page.

Case No.

Name of Person Convicted	Case No.	County & State	Sentence	MM/DD/YY Conviction
1				
2				
3				
4				
5				
6				

Additional convictions are listed on attached page in the same format as above.
Is there anything regarding your felony conviction(s) that you would like to bring to the Court's attention? (Optional)

e. Are there any criminal charges (felony or misdemeanor) *pending against you or anyone listed on this Application for Name Change at this time?*
Yes No If yes, list all pending charges below

Name of Person with Pending Charges	Name of Court or City & State	Case No.
1		
2		
3		
4		
5		
6		

Is there anything regarding your pending criminal charges that you would like to bring to the Court's attention? (Optional)

OATH OR AFFIRMATION

The contents of this document are true and correct to the best of my knowledge and belief.

Signature

Date

Sworn to or affirmed before me this date:

Seal/ My Commission expires

Deputy Clerk or Notary Public

Person Filing:
Mailing Address:
City, State, Zip:
Day/Evening Phone: _____ / _____
Person Filing is: SELF (No Attorney) OR Attorney
If Attorney, Bar No.: _____ Atty. Phone: _____

For Clerk's Use Only

SUPERIOR COURT OF ARIZONA IN MARICOPA COUNTY

In the Matter of:

Case Number:

NOTICE OF HEARING REGARDING APPLICATION FOR CHANGE OF NAME

Name(s) of person(s) requesting name change

READ THIS NOTICE CAREFULLY. An important court proceeding that affects your rights has been scheduled. If you do **not** understand this Notice or the other court papers, contact an attorney for legal advice.

- NOTICE:** An application for Change of Name has been filed with the Court by the person(s) named above. A hearing has been scheduled where the Court will consider whether to grant or deny the requested change. If you wish to be heard on this issue, you must appear at the hearing at the date and time indicated below.
- COURT HEARING.** A court hearing has been scheduled to consider the Application as follows:

DATE: _____ **TIME:** _____

BEFORE:

☐ Commissioner _____
125 W. Washington Street
Courtroom _____
Phoenix, AZ 85003

☐ Commissioner _____
18380 North 40th Street
Courtroom _____
Phoenix, AZ 85032

☐ Commissioner _____
14264 W. Tierra Buena Lane
Courtroom _____
Surprise, AZ 85374

☐ Commissioner _____
222 E. Javelina Drive
Courtroom _____
Mesa, AZ 85210

☐ Commissioner _____
101 W. Jefferson , ____ floor
Courtroom _____
Phoenix, AZ 85003

☐ Commissioner _____
201 W. Jefferson , ____ floor
Courtroom _____
Phoenix, AZ 85003

DATED: _____
(Month/Day/Year)

Applicant's Signature

Person Filing:
Mailing Address:
City, State, Zip:
Day/Evening Phone: _____ / _____
Person Filing is: SELF (No Attorney) OR Attorney
If Attorney, Bar No.: _____ Atty. Phone: _____

For Clerk's Use Only

SUPERIOR COURT OF ARIZONA MARICOPA COUNTY

In the Matter of

Case Number:

CONSENT OF PARENT TO NAME CHANGE OF OTHER PARENT AND WAIVER OF NOTICE

Name of Applicant
(Person Requesting Name Change)

REQUIRED INFORMATION FROM PARENT, UNDER OATH OR AFFIRMATION:

1. INFORMATION ABOUT ME:

Name:

Address:

Telephone:

Date of Birth:

Month

Day

Year

The applicant and I have at least one child in common.

2. I have read the Application for Name Change and consent to changing the other parent's legal name to new name of:

First

Middle

Last

3. I waive notice of all further proceedings in this matter.

OATH OR AFFIRMATION OF CONSENTING "OTHER PARENT"

The contents of this document are true and correct to the best of my knowledge and belief.

Signature

Date

Sworn to or affirmed before me this date:

My Commission expires

Notary Public or Deputy Clerk

Person Filing:
Mailing Address:
City, State, Zip:
Day/Evening Phone: _____ / _____
Person Filing is: SELF (No Attorney) OR Attorney
If Attorney, Bar No.: _____ Atty. Phone: _____

For Clerk's Use Only

SUPERIOR COURT OF ARIZONA IN MARICOPA COUNTY

In the Matter of

Case Number:

CONSENT OF SPOUSE TO NAME CHANGE OF OTHER SPOUSE AND WAIVER OF NOTICE

Name of Applicant
(Person Requesting Name Change)

REQUIRED INFORMATION, UNDER OATH OR AFFIRMATION:

1. INFORMATION ABOUT ME (the spouse of the applicant):

Name:

Address:

Telephone:

Date of Birth:

Month

Date

Year

I am married to the Applicant (the person requesting the name change).

2. I have read the Application for Name Change and consent to changing my spouse's legal name to the new name of:

First

Middle

Last

3. I waive notice of all further proceedings in this matter.

OATH OR AFFIRMATION OF CONSENTING SPOUSE

The contents of this document are true and correct to the best of my knowledge and belief.

Signature

Date

Sworn to or affirmed before me this date:

Seal/ My Commission expires

Deputy Clerk or Notary

Person Filing:
Mailing Address:
City, State, Zip:
Day/Evening Phone: _____ / _____
Person Filing is: SELF (No Attorney) OR Attorney
If Attorney, Bar No.: _____ Atty. Phone: _____

FOR CLERK USE ONLY

SUPERIOR COURT OF ARIZONA MARICOPA COUNTY

In the Matter of

Case Number:

CONSENT OF PARENT TO NAME CHANGE OF A MINOR CHILD AND WAIVER OF NOTICE

a Minor

REQUIRED INFORMATION FROM PARENT, UNDER OATH OR AFFIRMATION:

1. INFORMATION ABOUT ME:

Name:

Address:

Telephone:

Date of Birth:

Month

Date

Year

Place of Birth:

City

State

Nation

I am the natural MOTHER or FATHER of the minor child named above.

I am the adoptive MOTHER or FATHER of the minor child named above.

2. I have read the Application for Name Change and consent to changing the child's LEGAL name to:

First

Middle

Last

3. I waive notice of all further proceedings in this matter.

OATH OR AFFIRMATION

The contents of this document are true and correct to the best of my knowledge and belief.

Signature

Date

Sworn to or affirmed before me this date:

My Commission expires

Notary Public or Deputy Clerk

Person Filing:
Mailing Address:
City, State, Zip:
Day/Evening Phone: _____ / _____
Person Filing is: SELF (No Attorney) OR Attorney
If Attorney, Bar No.: _____ Atty. Phone: _____

FOR CLERK USE ONLY

SUPERIOR COURT OF ARIZONA MARICOPA COUNTY

In the Matter of

Case Number:

CONSENT OF PARENT TO NAME CHANGE OF A MINOR CHILD AND WAIVER OF NOTICE

a Minor

REQUIRED INFORMATION FROM PARENT, UNDER OATH OR AFFIRMATION:

1. INFORMATION ABOUT ME:

Name:

Address:

Telephone:

Date of Birth:

Month

Date

Year

Place of Birth:

City

State

Nation

I am the natural MOTHER or FATHER of the minor child named above.

I am the adoptive MOTHER or FATHER of the minor child named above.

2. I have read the Application for Name Change and consent to changing the child's LEGAL name to:

First

Middle

Last

3. I waive notice of all further proceedings in this matter.

OATH OR AFFIRMATION

The contents of this document are true and correct to the best of my knowledge and belief.

Signature

Date

Sworn to or affirmed before me this date:

My Commission expires

Notary Public or Deputy Clerk

Person Filing:

Address:

City, State, Zip Code:

Telephone Number(s): Day / Eve

Represented by Self (No Attorney) OR by Attorney

(If Attorney) Bar Number:

For Clerk's Use Only

SUPERIOR COURT OF ARIZONA IN MARICOPA COUNTY

In the Matter of

Case Number:

CONSENT OF MINOR TO NAME CHANGE (if minor is 14 or older)

A Minor

REQUIRED INFORMATION FROM MINOR, UNDER OATH OR AFFIRMATION

1. INFORMATION ABOUT ME:

Name on Birth Certificate:

First

Middle

Last

Address:

Telephone:

Date of Birth (Month / Day / Year):

Month

Date

Year

Place of Birth (City, State, Nation):

City

State

Nation

I am the minor who is the subject of this name change request.

I am at least 14 years of age.

2. I have read the Application for Name Change and consent to changing my legal name to:

First

Middle

Last

3. I waive notice of all further proceedings in this matter.

OATH OR AFFIRMATION OF MINOR

The contents of this document are true and correct to the best of my knowledge and belief.

Signature

Date

Sworn to or affirmed before me this date:

My Commission expires

Notary Public or Deputy Clerk

Person Filing:
Mailing Address:
City, State, Zip:
Day/Evening Phone: _____ / _____
Person Filing is: SELF (No Attorney) OR Attorney
If Attorney, Bar No.: _____ Atty. Phone: _____

For Clerk's Use Only

SUPERIOR COURT OF ARIZONA MARICOPA COUNTY

Case Number:

Name of Applicant

AFFIDAVIT OF SERVICE BY CERTIFIED MAIL

1. I am familiar with the facts stated in this Affidavit, and I make this Affidavit to show that I have served copies of the ***"Application for Change of Name"*** and the ***"Notice of Hearing Regarding Application for Change of Name"*** on the person named below by certified mail/restricted delivery, return receipt requested.

Person served (name of other party):

Address where other party was served:

Date of receipt by the other party:

2. The Application and Notice listed above were received by the other party as shown by the receipt, the original of which is attached to this Affidavit on a separate piece of paper.

The contents of this document are true and correct to the best of my knowledge and belief.

Signature of Sender

Date

Sworn to or affirmed before me this date:

My Commission expires

Notary Public or Deputy Clerk

**SUPERIOR COURT OF ARIZONA
IN MARICOPA COUNTY**

In the Matter of:

For Clerk's Use Only

Applicant (Name of Person Filing Request)

Case Number:

**ORDER CHANGING NAME
FOR A FAMILY**

THE COURT FINDS:

1. This case has come before this Court to change the legal names of the persons listed below.
2. This Court has jurisdiction to change the legal names of the persons as listed below.
3. Good cause exists to grant this application.
4. It is in the best interest of any minor child(ren) listed below.

THE COURT ORDERS:

1. **The name on the Birth Certificate or Current Legal Name:**

First	Middle	Last
Date of Birth:		
Month	Day	Year
Place of Birth:		
City	State	Nation

IS CHANGED TO:

First	Middle	Last
The name on the Birth Certificate or Current Legal Name:		
First	Middle	Last
Date of Birth:		
Month	Day	Year
Place of Birth:		
City	State	Nation

IS CHANGED TO:

First	Middle	Last
-------	--------	------

Case No.

The name on the Birth Certificate or Current Legal Name:

First Middle Last
Date of Birth:
Month Day Year
Place of Birth:
City State Nation

IS CHANGED TO:

First Middle Last
The name on the Birth Certificate or Current Legal Name:

First Middle Last
Date of Birth:
Month Day Year
Place of Birth:
City State Nation

IS CHANGED TO:

First Middle Last

2. For a person born in the State of Arizona, the Office of Vital Records is ordered to amend the birth record to reflect the new name as ordered above. Note that except for correction of error, a woman's maiden name *as recorded on the birth record*, is unaffected by an Order for Change of Name (*or by marriage*).

For a person born in a state other than Arizona, to the extent that the agency that maintains birth records in that state is authorized to honor an order of this Court, that agency is requested or ordered to amend its birth records to reflect the new name(s) as ordered above.

3. This Order does **not** establish paternity or add the name of a father to a birth certificate.
4. This Order does **not** release the persons named above from any obligations incurred or harm any rights of property or action in any original name.

5. Other Orders:* _____

* May **NOT** be used to establish paternity or to add the name of a father to a birth certificate.

DONE IN OPEN COURT: _____
Date Judicial Officer

**SUPERIOR COURT OF ARIZONA
IN MARICOPA COUNTY**

In the Matter of:

For Clerk's Use Only

Applicant (Name of Person Filing Request)

Case Number:

**ORDER CHANGING NAME
FOR A FAMILY**

THE COURT FINDS:

1. This case has come before this Court to change the legal names of the persons listed below.
2. This Court has jurisdiction to change the legal names of the persons as listed below.
3. Good cause exists to grant this application.
4. It is in the best interest of any minor child(ren) listed below.

THE COURT ORDERS:

1. **The name on the Birth Certificate or Current Legal Name:**

First	Middle	Last
Date of Birth:		
Month	Day	Year
Place of Birth:		
City	State	Nation

IS CHANGED TO:

First	Middle	Last
The name on the Birth Certificate or Current Legal Name:		
First	Middle	Last
Date of Birth:		
Month	Day	Year
Place of Birth:		
City	State	Nation

IS CHANGED TO:

First	Middle	Last
-------	--------	------

Case No.

The name on the Birth Certificate or Current Legal Name:

First Middle Last
Date of Birth:
Month Day Year
Place of Birth:
City State Nation

IS CHANGED TO:

First Middle Last
The name on the Birth Certificate or Current Legal Name:

First Middle Last
Date of Birth:
Month Day Year
Place of Birth:
City State Nation

IS CHANGED TO:

First Middle Last

2. For a person born in the State of Arizona, the Office of Vital Records is ordered to amend the birth record to reflect the new name as ordered above. Note that except for correction of error, a woman's maiden name *as recorded on the birth record*, is unaffected by an Order for Change of Name (*or by marriage*).

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* May **NOT** be used to establish paternity or to add the name of a father to a birth certificate.

DONE IN OPEN COURT: _____
Date Judicial Officer